1. DATE - TIME GROUP	2. LOCATION Lincoln, liebraska		
15 Harch 65 16/0135Z			
3. SOURCE Civilian	10. CONCLUSION Aircraft (B-47)		
4. NUMBER OF OBJECTS About Eight	B-47's departing Lincoln AFB, between 1930-1926 heading South. Descriptin conforms with the six engine fires and two over-wing lights of B-47 going away from the observer.		
5. LENGTH OF OBSERVATION	11. BRIEF SUMMARY AND ANALYSIS		
Seconds	About eight lights observed fro a matter of seconds.		
6. TYPE OF OBSERVATION	Described as a/c lights in odd formation. Looked like a/c lights, you light brown. Lights for ad semi-circle to rear.		
Ground-Visual	Disappeared over the horizon to 31.		
7. COURSE			
SW			
8. PHOTOS			
ZX No			
9. PHYSICAL EVIDENCE			
IX No			

FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

HEADQUARTERS FOREIGN TECHNOLOGY DIVISION

AIR FORCE SYSTEMS COMMAND
UNITED STATES AIR FORCE
RIGHT-PATTERSON AIR FORCE BASE, OHIO



ATTH OF: TDEW/UFO

suaject: UFO Sighting, 15 Mar 65, Lincoln, Nebraska



16 Mar 65

to: Commander Lincoln Air Force Base, Nebraska

- 1. Reference the attached FTD Form 164 reporting an unidentified flying object observed on 15 Mar 65, Lincoln, Nebraska. Report indicates that object was first reported to Lincoln AFB. If so, was a conclusion made as to what was observed?
- 2. If an evaluation has not been made, request your base check both military and civilian aircraft flights in area at the time of sighting.

FOR THE COMMINIDER

TRIC Tide JONCKHEERE, Colonel, USAF Deputy for Technology

Deputy for Technology and Subsystems 1 Atch FTD Form 164

1st Ind (BDCO)

25 MAR 1500

Ho 818 Ombt 3pt Gp, Lincoln AFB, Nebr, 68519

TO: Foreign Technology Division (TDET/UFO), Wright-Patterson AFB, Ohio

- 1. At the time specified in the sighting report we had one B-47 flying instrument practice in the local area. There were three B-47 departures between 1920 and 1926, and two DC-3 arrivals between 1926 and 1930.
- 2. The B-47s took off to the south and it is believed that the sighting was a departing B-47. A B-47 going away from the observer in the dark would give an appearance as described with its six engine fires and two over-wing lights.

FOR THE COMMANDER

JOHN T. MARTIN

hase Director of

Ad Indistrative Services.

1 atch n/c

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have absorved. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

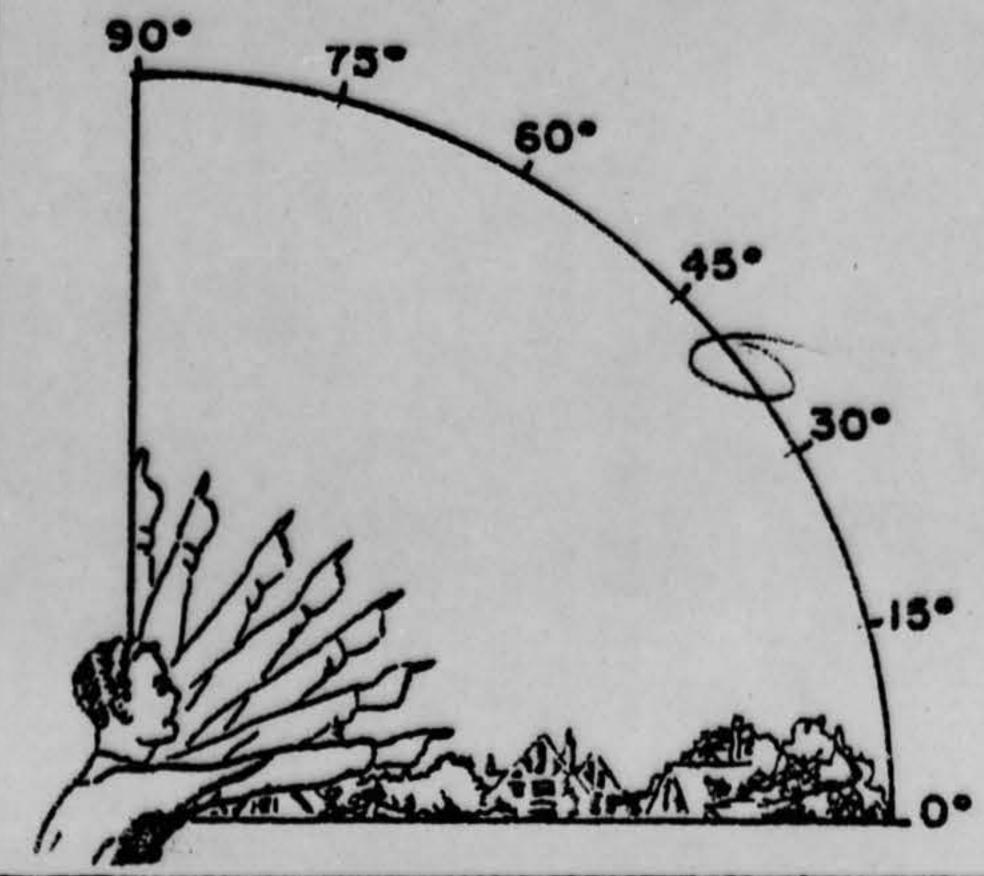
1. When did you see the object?	2. Time of day: 1935 Hour Minutes
15 MARCH 65 Month Your	(Circle One): A.M. or P.M.
3. Time Zone: (Circle One): a. Eastern Central c. Mountain d. Pacific e. Other	(Circle One): a. Daylight Saving Standard
4. Where were you when you saw the object?	
LINCO	LN NEB
Nearest Postal Address	City or Town State or County
5. How long was object in sight? (Total Duration)	Hours Minutes Seconds
a. Certain c. 1	lot very sure
b. Fairly certain	lust a guess
5.1 How was time in sight determined?	
5.2 Was object in sight continuously? Yes 🔀	No
6. What was the condition of the sky?	
DAY a. Bright b. Cloudy	SHT — Bright Cloudy
7. IF you saw the object during DAYLIGHT, where was t	he SUN located as you looked at the object?
	o your left verhead on't remember

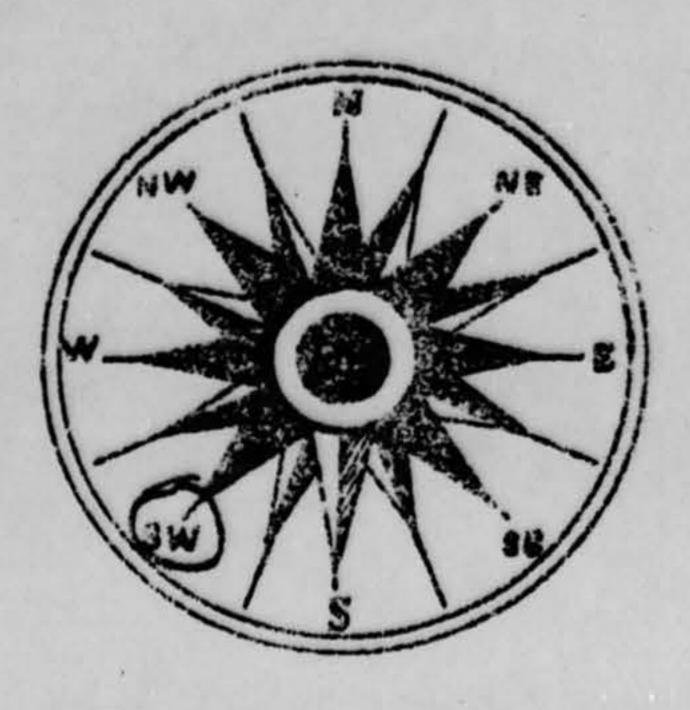
8. IF you saw the object at NIGHT, what did you notice co	oncerning the STARS and MOON?
8.1 STARS (Circle One): 8.2 MO	ON (Circle One):
	D-!-L+
a. None b. A few	Bright moonlight Dull moonlight
	No moonlight - pitch dark
G. Don't remember	Don't remember
9. What were the weather conditions at the time you saw th	e object?
CLOUDS (Circle One): WEATHS	ER (Circle One):
a. Clear sky a. Dry	
	mist, or light rain
	rate or heavy rain
d. Thick or heavy clouds d. Snow	
e. Don't	t remember .
10. The object appeared; (Circle One); a. Solid b. Transparent c. Vapor d. As a light e. Don't remember	
a. Brighter c. About the so b. Dimmer d. Don't know 11.1 Compare brightness to some common object:	, 700
12. The edges of the object were:	
(Circle One): a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember	o. Other Look ED LIKE
13. Did the object:	(Circle One for each question)
a. Appear to stand still at any time?	Yes No Don't know
b. Suddenly speed up and rush away at any time?	Yes Don't know
c. Break up into parts or explode?	Yes No Don't know
d. Give off smoke?	Yes No Don't know
e. Change brightness?	Yes (No) Don't know
f. Change shape?	Yes No Don't know
g. Flash or flicker?	Yes No Don't know
h. Disappear and reappear?	Yes No Don't know

14.	Did the object disappear while you were watching it? If so, how? OVER HORIZON
-	
15.	Did the object move behind something at any time, particularly a cloud?
	(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind:
16.	Did the object move in front of something at any time, particularly a cloud?
	(Circle One): Yes No Don't Know. IF you answered YES, then tell what in front of:
	Tell in a few words the following things about the object: a. Sound
	11 2 1 C B C LIN
	b. Color
18.	We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?
	Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving. SEM + CIRCLE OPEN COAR

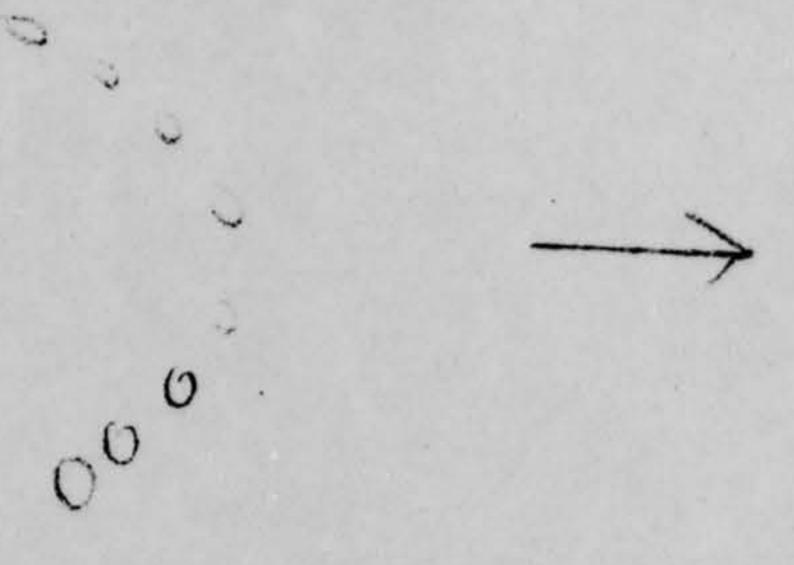
20.	Do you think you can estimate the speed of the obje (Circle One) Yes No	2 17 3 See Lower to
		stimate?
21.	Do you think you can estimate how far away from yo (Circle One) Yes No	u the object was?
	IF you answered YES, then how far away would you	say it was?
22.	Where were you located when you saw the object? (Circle One):	23. Were you (Circle One)
		a. In the business section of a city?
	a. Inside a building	(b.) in the residential section of a city?
	b. In a car	c. In open countryside?
	C. Outdoors	d. Near an airfield?
	d. In an airplane (type)	e. Flying over a city?
	es. At sea	f. Flying over open country?
	f. Other	g. Other
	24.1 What direction were you moving? (Circle One) a. North b. Northeast d. Southeast 24.2 How fast were you moving? 24.3 Did you stop at any time while you were looking (Circle One) Yes No	e. South g. West f. Southwest h. Northwest niles per hour.
25.	Did you observe the object through any of the follow	ing?
	a. Eyeglasses (Yes) No	. Binoculars Yes No
		f. Telescope Yes No
	c. Windshield Yes No	. Theodolite Yes No
	d. Window glass Yes No h	. Other
26.		ible of what you saw, describe in your own words a common would give the same appearance as the object which you says

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.





28. Draw a picture that will show the motion that the object or objects made. Place on "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



31. Was anyone else with you at the time you saw the object? (Circle One) 31.1 IF you answered YES, did they see the object too? (Circle One) 31.2 Please list their names and addresses: 32. Please give the following information about yourself: NAME Last Name ADDRESS Street TELEPHONE NUMBER AGE 23 SEX M Indicate any additional information about yourself, including any special experience, which might be partition.	30.	Have you ever seen	this, or a similar obj	ect before. If so	give date or date	es and locat	ion.
31.2 Please list their names and addresses: 32. Please give the following information about yourself: NAME Less Name ADDRESS Street TELEPHONE NUMBER: AGE 23 SEX M Indicate any additional information about yourself, including any special experience, which might be partition.	31.	Was anyone else wit	th you at the time you	saw the object?	(Circle One)	Yes	N
ADDRESS Street ACE 23 SEX M Indicate any additional information about yourself, including any special experience, which might be partition	*				(Circle One)	Yes	No
ADDRESS Street AME Last Name AINCUAN State AGE 23 SEX M Indicate any additional information about yourself, including any special experience, which might be partition							
ADDRESS Street ADDRESS Street AGE 23 SEX M Indicate any additional information about yourself, including any special experience, which might be partition	32.	Please give the follo	owing information abo	out yourself:			
TELEPHONE NUMBER. AGE 23 SEX M. Indicate any additional information about yourself, including any special experience, which might be partition		NAME	Last Name		Trar Name	*****	
Indicate any additional information about yourself, including any special experience, which might be partinen		ADDRESS -			L/NCUA	N 5350 Zone	/ NEB
		TELEPHONE NUMB	ER	AGE -	23 SE	× 4	
33. When and to whom did you report that you had seen the object? ZINCOLIV ALD	33.	When and to whom di	d you report that you	had seen the obj	ect? LIN	CU 12 12	ALC
Day Month Year							

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